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OF INTEREST TO CRIPPLED CHILDREN WORKERS

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This Bulletin is a monthly service of the National Society for Crippled Children to its affiliated societies and to its Institutional Members - hospitals, homes, schools, service groups, social work organizations, colleges and universities offering professional training for workers with the crippled, state agencies interested in prevention, treatment, education, or vocational rehabilitation, and interested lay and professional individuals.

Any publication listed or digested here may be borrowed free of charge from the Bureau of Information of the National Society. Bibliographies listing similar articles, or loan package libraries containing additional literature on any of the subjects discussed in these articles, will be sent to any crippled children worker or student upon request.

We do not attempt to list or review here articles published in THE CRIPPLED CHILD Magazine or THE CRIPPLED CHILD BULLETIN, because all individuals and organizations receiving this Bulletin also receive these two periodicals and all other publications of the National Society as part of the privilege of their membership.

Further information on the work of the Society, on responsibilities and privileges of Institutional Membership, and on any other phases of work for crippled children will be sent upon request.

Lillian Dowdell, Librarian

ARTICLES OF GENERAL INTEREST

Club-foot clinic, The. News Letter from the Oklahoma Society for Crippled Children, March, 1940. Vol. 15, No. 3, pg. 1.

"Any indigent baby born with club feet in the State of Oklahoma has an excellent chance of having the feet made straight in this special clinic at the Oklahoma Hospital for Crippled Children. Since January 1, 1938, 86 individual children have registered here for treatment. The great percentage of these have returned regularly to the clinic, and good results have been obtained. Regardless of the causation of this deformity, parents on the whole have been unusually cooperative in its correction."

"The plaster is applied at the first visit and then the child can return home until it is time for him to return for a new plaster, thereby saving hospital beds. ... The ordinary case of club feet is required to visit the hospital clinic frequently during the first year in order to secure a complete correction and during this time 20 to 25 individual casts are applied at intervals."

Hill, David, Jr. Wagner-George Hospital Bill may be finally approved this month. Hospital Management, April, 1940. Vol. 49, No. 4, pg. 13.

National Hospital Act of 1940 - the President's program for rural hospitals. Hospitals, April, 1940. Vol. 14, No. 4, pg. 62.

This article presents the statements made by Fred G. Carter, M. D., Honorable William F. Montavon, and Arthur M. Calvin (for the American Hospital Association, Catholic Hospital Association, and American Protestant Hospital Association, respectively) to the Senate sub-committee considering the National Hospital Act of 1940, S. 3230.

Summer courses for public health nurses. Public Health Nursing, April, 1940. Vol. 32, No. 4, pg. 254.

Survey of Crippled. Survey Midmonthly, April, 1940. Vol. 76, No. 4, pg. 141.

This item, listed under "Concerning Children" in "The Social Front" section, is reprinted here in its entirety:

"Illinois has a total of 32,000 crippled children, according to figures gathered by the State Welfare Department's division of handicapped children in cooperation with the WPA. Approximately 15,000 of these children live in Chicago. Data on 12,568 cases outside Chicago show the most frequent type of orthopedic handicap to be residual infantile paralysis; next most frequent, spastic paralysis. More than 80 percent of the children are under the care of some organization."

CRIPPLING CONDITIONS

Bell, Charlotte, O. T. R. and Swaim, Loring T., M. D. Occupational therapy in arthritis. Public Health Nursing, April, 1940. Vol. 32, No. 4, pg. 243.

A discussion of the principles of occupational therapy in the treatment of chronic arthritis, this article also mentions and illustrates by photographs some of the occupations and crafts utilized and their adjustment to individual cases.

brunnstrom, Signe. The changing conception of posture. The Physiotherapy Review, March-April, 1940. Vol. 20, No. 2, pg. 67.

"A survey of the literature on posture reveals that, during the last twenty years, most writers on the subject agree that good posture is characterized by an easy balance of the weights of the body, by absence of strain, by minimum expenditure of energy in maintaining good alignment and by freedom of motion. With very few exceptions, the same writers advocate contraction of gluteals, abdominals, and shoulder retractors as a means of obtaining good posture. It seems as if there were a great deal of inconsistency between aims of posture training and methods employed.

"With a modern conception of posture as a basis, some criteria for posture training are set up (by the author).

"The mechanics of the pelvis is discussed briefly. It is stated that the gluteus maximus muscle need not contract in the ordinary standing position, a statement which is substantiated by anatomical observations. Therefore holding the pelvis in place by pulling down with this muscle is tantamount to training wrong postural habits.

"A study of the mechanics of the shoulder girdle leads to the conclusion that a good balance of the shoulder girdle can be obtained by improving the relationship between head, spinal column and pelvis. Contraction of the shoulder adductors means waste of energy and increase of tension and therefore should be avoided.

"Reference is made to the work of Elin Falk, Mabel Elsworth Todd and Lulu E. Sweigard, whose ideas on body mechanics and posture are both stimulating and challenging. It is hoped that all persons dealing with the problems of posture will become acquainted with their work."

Farris, Edna E. Underwater treatment for new poliomyelitis cases. The Physiotherapy Review, March-April, 1940. Vol. 20, No. 2, pg. 67.

Immediate care of fractures stressed at American College of Surgeons meeting. Hospital Management, April, 1940. Vol. 49, No. 4, pg. 26.

Infantile paralysis. The International Bulletin for Economics, Medical Research, and Public Hygiene, Vol. A 40. Published and distributed in the United States by the National Foundation for Infantile Paralysis, 120 Broadway, New York, New York. 1940. 179 pages.

This booklet is to be reviewed in a future edition of THE CRIPPLED CHILD Magazine.

Kawin, Ethel. Play therapy for special needs. The Modern Hospital, April, 1940. Vol. 54, No. 4, pg. 61.

Describes and suggests play activities and toys suitable for two groups of children with special needs - the cardiac and the crippled. Includes a list of toys that encourage hand and arm movements. A large portion of the article is given to consideration of play therapy for the spastic child.

"The treatment of cerebral palsy, aside from surgical operation, consists of a series of physical exercises designed to relax and develop the muscles and to bring them under voluntary control. A muscle may be relaxed and exercised by inducing movements of the child's limbs while the child himself remains passive. Voluntary control of motor movements cannot, however, be established by induced

movement; such control, by its very nature, is dependent upon the cooperation of the child."

"All children have need of the satisfaction and stimulation of successful performance, but children with spastic problems need such encouragement as a constant stimulus. They should be exposed as little as possible to experiences of frustration and failure."

"The play activities of these boys and girls must usually take place under supervision because they are likely to need help in manipulating materials. For them guidance in play activities is important because even carefully chosen toys and games will not in themselves teach them what they need to learn."

"All thoughts of competition should be kept away from the play of this group of children. The child himself may reach a point, however, where he can derive encouragement from his own record of progressive achievement. His efforts, no matter how crude, should not be laughed at, but if a sense of humor can be constructively developed in such a child, it will be a great asset to him throughout life."

Margolis, H. M., M. D. and Eisenstein, V. W., M. D. Some specific measures in the treatment of rheumatoid arthritis. The Journal of the American Medical Association, April 13, 1940. Vol. 114, No. 15, pg. 1433.

The following is reprinted from the "Summary and Conclusions" at the end of the article:

"The cross section of actual medical practice as it relates to certain specific therapeutic measures in arthritis, based chiefly on a questionnaire survey (of members of the American Rheumatism Association) and supported by our own experiences, justifies the following conclusions:

1. Sulfur therapy is both without rationale and without effect.
2. Vaccines are apparently losing hold. Although their employment results in 'benefit' in a proportion of cases, such results are attributable not to any specific effect of the vaccine but apparently to the psychologic effect of the injection.
3. It is the practically unanimous opinion from all over the country that the therapeutic results from fever therapy are only transitory, and even these are obtained in such a small proportion of cases treated that this form of therapy cannot assume any place of importance. The risks involved, as well as the technical difficulties entailed, far outweigh any modicum of benefit that might be expected.
4. Sulfanilamide is unanimously condemned for use in rheumatoid arthritis.
5. Gold salts offer a promising, but at present dangerous, adjunct to the armamentarium of the practitioner.
6. There is no royal road to the successful treatment of arthritis. A well rounded medical management, tempered with sound clinical judgment, must still prevail as the best therapeutic regimen."

Swaim, Loring T., M. D. Physical therapy in arthritis. Public Health Nursing, April, 1940. Vol. 32, No. 4, pg. 246.

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"At the Robert B. Brigham Hospital (in Boston, where Dr. Swaim is senior orthopedic consultant and chairman of the staff) physiotherapeutic measures begin at the start of the treatment and continue in the all important follow-up clinic. These measures range from a direct therapy of the acutely inflamed joints to a general supervision of the body mechanics of the patient as a whole."

"In following the results of physiotherapeutic procedures, a complete photographic record is helpful. These photographs, taken at regular intervals, include posture pictures, pictures of visible deformities of joints, and composite pictures showing limitation of joint motion. Measurements of joint motion are also recorded numerically on graphs at regular intervals."

The article describes the rest procedures, posture exercises and exercises of the affected joints, and the application of heat in the form of hot fomentations, paraffin wax, and steam baths.

E D U C A T I O N

Despite major gains and developments of the past decade, special education is not yet reaching 2,400,000 in need. The School Executive, March, 1940. Vol. 59, No. 7, pg. 16.

Quotes the address of Professor John J. Lee of the Division of Special Education, Wayne University, to a Sectional meeting of the 1940 Convention of the American Association of School Administrators.

In closing, Mr. Lee pointed out that while "we may claim that what is being done in the education of the handicapped and the gifted is good, we are, at the same time, forced to recognize that we are only solving approximately one-tenth of the problem. ... Of approximately 2,850,000 handicapped and gifted children in the United States, 371,587 were enrolled in special schools and classes in 1936. ... When school administrators and boards of education are able to obtain economic resources to provide for the remaining 2,400,000 in need of special educational opportunities, education will have moved a long step forward."

Laycock, Samuel R., Ph. D. The mental hygiene of exceptional children. Journal of Exceptional Children, April, 1940. Vol. 6, No. 7, pg. 244.

After outlining the mental health needs and problems of all children, and then of gifted children, Dr. Laycock discusses the effects of mental and physical handicaps on these needs and problems.

"... the most fundamental problem of the education of the handicapped is to provide situations where these children can achieve a sense of personal worth. They cannot be mentally healthy without a sense of achievement. What these children are taught in school has less value from a vocational or even a practical standpoint than from the standpoint of giving these children ego-recognition.

"... The greatest task that the educators of the blind, the deaf, the crippled, the epileptic and the cardiacs have is not so much to find things that these children can do as to find things to do that give these children adequate ego-recognition in spite of their handicap. Some teachers, in the past, have tried to handle this problem by unduly exaggerating the value of mediocre achievement. Carried beyond a certain point this defeats its own end. What handicapped children require is an earnest searching on the part of educators for tasks where achievement worthy of some social recognition is possible. What the physically

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handicapped need are tasks in which they can taste the joy of successful achievement and which brings them the genuine recognition of others.

"All handicapped children, too, need the satisfaction that comes from ministering to the pleasure and welfare of others. ... We have been so concerned with what we could do for the handicapped and what they could do for themselves that we have tended to neglect the important matter of what they could do for others. ... With the physically handicapped, teachers may emphasize how much personal service can be contributed to others by a genuine interest in them and by small courtesies that may be rendered.

"... since handicapped children often suffer more than the usual amount of frustration in following their desires in work, play and in choosing a career, teachers have a particular responsibility for wise guidance in the development of the interests of these children... A good teacher of the blind, the deaf, the crippled, the cardiacs, or the subnormal must know, as far as possible, whether interests, hobbies, play-activities, and occupations are likely for a particular child to lead to frustration or to a sense of happy self-realization. ... To help the handicapped to find a real sense of freedom because their interests carry them into fields where they may achieve is the task of the teacher."

Parkhill, R. Park. The orthopedic department of John Williams School (Rochester, New York). The Physiotherapy Review, March-April, 1940. Vol. 20, No. 2, pg. 95.

P R E V E N T I O N --- S A F E T Y E D U C A T I O N

Anderson, Mary C. A study of bicycle safety. Midland Schools, April, 1940. Vol. 54, No. 8, pg. 247.

Odom, Charles L. Individualizing safety instruction in the elementary school. Safety Education, April, 1940. Vol. 19, No. 7, pg. 342.

Safety education methods - elementary school. National Safety Council, Inc., 20 North Wacker Drive, Chicago. 1940. 95 pages. 50¢.

An illustrated teachers' manual listing safety activities suitable for primary grades, intermediate grades, and upper grades of the elementary school, and also for school activities such as Junior Safety Councils and School Safety Patrols. The activities and projects suggested have all proved successful when tried in schools throughout the country. Some of the material appeared originally in Safety Education Magazine. The appendix contains a selected bibliography and samples of the Standard Student Accident Report Forms.

Summer courses in safety. Safety Education, April, 1940. Vol. 19, No. 7, pg. 354.

Two distinct types of courses are listed: General courses - those in which the entire safety field will be viewed; and Driver Training courses - those in which actual road instruction is included among traffic safety problems.

R E P O R T S A N D O T H E R P U B L I C I T Y (From Societies and Institutions for Crippled Children)

Central Council for the Care of Cripples (London, England), Annual Report, 1939. Printed. 36 pages plus detachable "Form of order on bankers" and "Annuity deed in favor of the Central Council for the Care of Cripples." Blue cover.

"...And feet was I to the lame." Association for the Aid of Crippled Children (New York City), Fortieth Annual Report, January 1, 1939 - December 31, 1939. Printed. 32 pages plus detachable gift blank to be marked to indicate purpose of gift. 22 photographs (17 of which show crippled children happily receiving services - nursing, social, recreational, etc. - supplied by the organization.) Gray cover with Dubonnet ink.

Tenth Annual Report and Balance Sheet of the New South Wales Society for Crippled Children - for year ended December 31st, 1939. Printed. 8 pages plus detachable, illustrated gift blank. Gray cover with blue ink and small illustration.

Detroit League for the Handicapped, Inc. - Summarized Annual Report for 1939. Mimeographed. One legal-size page. Report of social service department and detailed financial report on sheltered workshop and home industries.

Annual Report, 1939, The Convalescent Home of the Children's Hospital, Wellesley Hills (Massachusetts.) One printed sheet, $13\frac{1}{2}$ " x 15", folded three times. White with green int. 4 illustrations.

"Rosemary," The Johanna Grasselli Home for Crippled Children, (Cleveland) 1922-1939. Printed. 22 pages. 8 full-page illustrations. Brown suede-finish cover, gold lettering.

The Crippled Children's Guild of Buffalo, Inc., 30th Annual Report, 1938-1939. Printed. 29 pages. 13 small illustrations. Buff cover, illustrated.

Publications

Hospital Management, 100 East Ohio St., Chicago. \$2.00 per year; 20¢ per copy.
Hospitals, American Hospital Association, 18 East Division St., Chicago. \$3.00 per year.

The Journal of the American Medical Association, 535 North Dearborn St., Chicago. (weekly) \$3.00 per year.

Journal of Exceptional Children, 1235 W. Michigan Avenue, Lansing, Michigan. Monthly, October to May, inclusive. 30¢ per copy.

Midland Schools, Iowa State Teachers' Association, 415-16 Shops Bldg., Des Moines. Monthly except June, July, and August. \$1.50 per year; 25¢ per copy.

The Modern Hospital, 919 North Michigan Ave., Chicago. \$3.00 per year; 35¢ per copy (current issues).

News Letter from the Oklahoma Society for Crippled Children, Inc., 313 Franklin Bldg., Oklahoma City. 10¢ per year.

The Physiotherapy Review, 737 N. Michigan Avenue, Chicago. (Bimonthly) \$2.50 per year; 50¢ per copy.

Public Health Nursing, National Organization for Public Health Nursing, 50 West 50th St., New York City. \$3.00 per year; 35¢ per copy.

Safety Education, National Safety Council, 20 N. Wacker Drive, Chicago. Monthly except June, July and August. \$2.00 per year.

The School Executive, Orange, Connecticut. \$2.00 per year; 25¢ per copy.

Survey Midmonthly, 112 East 19 Street, New York City. \$3.00 per year; 30¢ per copy.